

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "Cosmetic and dermatological preparations with a content of chitosan and phospholipids"

the specification of which is attached hereto.

-OR-

was	filed on	as				
App	olication Seria	al No	and was am	ended		
				d the contents o eferred to above.		entified specification
	•		nformation which eral Regulations		ne examination	of this application in
or patent o	r inventor's	certificate list	ed below and h	ave also identifie	ed below any fo	foreign application(s) preign application for priority is claimed:
M La Prior F	oreign Applic	cation(s)			Priority (<u>Claimed</u>
OPrior F	iber)	(Country)	(Day/Mo	onth/Yr. Filed)	[X] yes	[] no
(Num	nber)	(Country)	(Day/Mo	onth/Yr. Filed)	[X] yes	[] no
sted below he prior Ur Code, §112 Regulations	and, insofar lited States a , I acknowled , §1.56(a) w	as the subjection in the duty to	ect matter of eac the manner prov o disclose mater I between the fil	th of the claims of the first it is information as	of this application paragraph of Ti defined in Title	States application(s) on is not disclosed in the 35, United States 37, Code of Federa and the national or
(Applio	cation Serial	No.)	(Filing Date)	•	atus) iding, abandone	 d)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNE a named Inventor, I hereby appoint the found agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Arnold Sprung, Reg. No. 17.232; Nathaniel D. Kramer, Reg. No. 25,350; Ira J. Schaefer, Reg. No. 26,802, and Esther Steinhauer, Reg. No. 40,255 all of 120 White Plains Road, Tarrytown, New York 10591; Kurt G. Briscoe, Reg. No. 33,141; William C. Gerstenzang, Reg. No. 27,552; Carmella A. O'Gorman, Reg. No. 33,749 and Stephen G. Ryan, Ref. No. 39,015 all of 660 White Plains Road, Tarrytown, New York 10591-5144, my attorneys with full power of substitution and revocation

Send Correspondence To:

Sprung Kramer Schaefer & Briscoe 660 White Plains Road Tarrytown, N. Y. 10591-5144

Direct Telephone Calls To:

(914) 332-1700

	1.0						
Full Name Of Sole or First Inventor	Inventor's Signature	1 -0	Date COO				
Rainer Kröpke	40mes	Loge	<i>3.8.1</i> 399				
Residence		Citizenship					
Achterndiek 23, D-22869 Schenefeld, Germany		German					
Post Office Address							
Achterndiek 23, D-22869 Schenefeld, Germany							
Full Name Of Second Inventor	Inventor's Signature	Λ	Date				
Dr. Günther Schneider	12:7) (Vacco)	3.8.1999				
Residence		Citizenship					
Adickesstraße 33, D-22607 Hamburg, Germany		German					
Post Office Address							
Adickesstraße 33, D-22607 Hamburg, Germany							
Full Name Of Third Inventor	Inventor's Signature		Date				
		*					
Residence]	Citizenship					
		,					
Post Office Address							
1 Of Olice Address							
Full Name Of Fourth Inventor	Inventor's Signature		Date				
Tuli Name Of Fourth inventor	inventor s orginature		Date				
Decide		Citionachia					
Residence		Citizenship					
Post Office Address							
			-				
Full Name Of Fifth Inventor	Inventor's Signature		Date				
Residence		Citizenship					
Post Office Address	· -						
Full Name Of Sixth Inventor	Inventor's Signature	<u>-</u>	Date				
Residence		Citizenship					
Post Office Address							
Full Name Of Seventh Inventor	Inventor's Signature		Date				
Residence	L	Citizenship	L _				
Post Office Address							
• • • • • • • • • • • • • • • • • • •							